



LOS ANGELES COUNTY COMMISSION ON HIV

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STANDARDS OF CARE (SOC) COMMITTEE MEETING MINUTES

March 1, 2012

Approved
6/7/2012

MEMBERS PRESENT	MEMBERS ABSENT	DHSP STAFF	COMM STAFF/ CONSULTANTS
Angélica Palmeros, <i>Co-Chair</i>	Mark Davis	Angela Boger	Phil Meyer
Fariba Younai, <i>Co-Chair</i>	Terry Goddard		Jane Nachazel
Lilia Espinoza	Jocelyn Woodard/Robert Sotomayor		Craig Vincent-Jones
David Giugni		PUBLIC	
Carlos Vega-Matos		Brett Morana	
		Jason Wise	

CONTENTS OF COMMITTEE PACKET

- 1) **Agenda:** Standards of Care (SOC) Committee Agenda, 3/1/2012
- 2) **Minutes:** Standards of Care (SOC) Committee Minutes, 1/5/2012
- 3) **Memorandum:** Role of Interns, 12/27/2012
- 4) **Standards of Care:** Mental Health, Section Draft: Utilizing Interns, Associates and Trainees – Counseling and Psychotherapy Services, 10/11/2011
- 5) **Standards of Care:** Mental Health Services, 12/14/2011

1. **CALL TO ORDER:** Ms. Palmeros called the meeting to order at 10:00 am.
2. **APPROVAL OF AGENDA:**
MOTION #1: Approve the Agenda Order (*Passed by Consensus*).
3. **APPROVAL OF MEETING MINUTES:**
MOTION #2: Approve the 1/5/2012 Standards of Care (SOC) Committee meeting minutes (*Passed by Consensus*).
4. **PUBLIC COMMENT, NON-AGENDIZED:** There were no comments.
5. **COMMISSION COMMENT, NON-AGENDIZED OR FOLLOW-UP:** There were no comments.
6. **CO-CHAIRS' REPORT:**
 - A. **Co-Chair Nominations:** Ms. Palmeros and Dr. Younai were nominated. Nominations close and elections will be held in April.
 - B. **FY 2012 Work Plan:**
 - ➡ Mr. Vincent-Jones and the Co-Chairs will develop the Plan.
7. **MENTAL HEALTH STANDARD OF CARE:**
 - Mr. Vincent-Jones noted SOC had expertise to review this standard so no Expert Review Panel was planned. The Commission and SOC have full authority within County Ordinance and Commission By-Laws to make determinations.
 - Mr. Meyer reported this iteration of the Standard combines Psychotherapy and Psychiatry in a fairly straight forward manner with no substantial changes to either prior standard. He also noted the DHSP memorandum on interns, associates and trainees and his draft on relevant language in the packet for review. He felt that the primary area for consideration.

Standards of Care Committee Meeting Minutes

March 1, 2012

Page 2 of 3

- Mr. Meyer reviewed key standard components as follows:
 - ⇒ Pages 4-5, Service Introduction, sections of the two prior standards are integrated and redundancies eliminated;
 - ⇒ Pages 6-8, Service/Organizational Licensure Category, separate sections describe practitioner requirements for Counseling and Psychotherapy Services including Marriage Family Therapists and Psychiatric Services;
 - ⇒ Pages 9-10, Definitions and Descriptions, integrates information from both services;
 - ⇒ Pages 11-12, How Service Relates to HIV, provides a brief literature review reflecting value of such services for PWH;
 - ⇒ Pages 13-24, Service Components, Counseling and Psychotherapy Services, provides a more environmental mental health service but requires similar assessments to Psychiatric Services excepting medications;
 - ⇒ Pages 24-37, Service Components, Psychiatric Services, provides a more medical mental health service including medications but requires similar assessments to Counseling and Psychotherapy Services.
- Ms. Boger said services themselves are consistent with those offered by the Department of Mental Health (DMH), but DMH services are offered based on diagnostic tiers. Ryan White also offers group and family therapy not available through DMH.
- Mr. Vincent-Jones said the understanding of wrap-around services for Low Income Health Program (LIHP) clients was that Ryan White could provide uncovered services such as family therapy to Healthy Way LA clients. Coordination will benefit by the DMH nomination of Dr. James Jones, Regional Medical Director, SPAs 4-6, for the Other County Department seat. It was agreed that the DMH nominee would be LIHP knowledgeable. The nomination will go to the Commission 3/15/2012.
- Dr. Younai asked when people are identified as needing psychotherapy and/or psychiatric services. Mr. Vega-Matos said clients are now assessed at various entry points, but under Medical Care Coordination (MCC) a clinical social worker and registered nurse will screen clients for all services. Those needing mental health services will be referred for assessment.
- The County Ryan White system now funds psychiatry through the medical home, but psychotherapy is often funded outside it and coordination can be poor. Ideally, a basic mental health assessment would branch to psychotherapy and/or psychiatry. DMH begins with intake, followed by assessment and a treatment plan with interventions determined last.
- Mr. Meyer noted Psychotherapy and Psychiatry assessments are standard-specific in a way not readily integrated. This iteration guards original language which would need to be changed to create a single linear standard. Mr. Vincent-Jones reiterated that SOC has sufficient expertise to review such language. Just as the MCC Standard requires coordination with Mental Health, the Mental Health Standard can require coordination so clients need not undergo multiple assessments.
- Mr. Vega-Matos said the system is being developed to help clients choose a medical home which may be funded by Ryan White, Healthy Way LA or Medi-Cal/Medicare. Mr. Vincent-Jones noted MCC should help clients navigate that. It is understood that moving from a closed to an open system will present challenges that need to be addressed.
- Dr. Younai pointed out potential contract issues, e.g., the ability of providers to work together such as with record access.
- On interns/associates/trainees, Ms. Boger said standard practice is for adequate training, appropriate case assignment and adequate supervision. DHSP has found many agencies have too many interns to supervise adequately. Also, cases are often closed due to an intern's return to school rather than treatment completion. Supervisors should assume such cases.
- Mr. Vincent-Jones said SOC can incorporate higher standards or retain current minimum expectations. DHSP may require practices that exceed minimum expectations. Mr. Vega-Matos said DHSP prefers incorporation as Mental Health uses these staff more than other services and agencies often use standard minimums as a reason not to comply with DHSP practices.
- ➡ Ms. Boger will verify whether DMH offers any group or family therapy in general, whether such services are offered via Healthy Way LA and what funding stream(s) are available to reimburse any such services.
- ➡ Agreed not to repeat the intake screening already covered in MCC in the Mental Health Standard assessment.
- ➡ Ensure all clients not initially screened through MCC are referred to MCC either right away or after emergency treatment.
- ➡ Mr. Meyer will rewrite the standard in a linear form and email it for review one to two weeks prior to the next meeting.
- ➡ Mr. Meyer will delete quality improvement and other boilerplate sections such as cultural competency which will be addressed in a separate document for all standards. He will also delete outcomes, indicators and benchmarks since the Commission and DHSP are developing those for all standards through a separate process.
- ➡ Mr. Meyer will add a section on utilizing interns, associates and trainees reflecting the concerns identified in Ms. Carter's memorandum except for the last point and requiring agencies to identify the professional level of the intern, associate or trainee, identify the person's supervisor and provide a consent form that details the relationship.
- ➡ Mr. Morana, APLA, will forward the consent form used by APLA for clients receiving intern/associate/trainee services.

Standards of Care Committee Meeting Minutes

March 1, 2012

Page 3 of 3

8. GRIEVANCE POLICY AND PROCEDURES:

- Mr. Vincent-Jones said a conference call was scheduled with the Project Officer 3/7/2012 to correct misperceptions from the previous Project Officer and answer questions about the new document. Conditions of Award have already been lifted.
- The new policy/procedure will be presented at the 3/15/2012 Commission meeting if all questions are resolved.

9. EVALUATION OF SERVICE EFFECTIVENESS (ESE):

- Mr. Vincent-Jones reported the Oral Health ESE will be completed first. It will serve as a pilot and, if completed in time, may be submitted as an abstract for the XIX International AIDS Conference. The goal is to complete it by May.
- A meeting was scheduled with Mr. Vega-Matos on surveys and other data the next week. Surveys will then be finalized and released. Another larger ESE piece pertains to outcomes which must be consistent with data available from DHSP.

10. STANDARDS OF CARE: There was no additional discussion.

11. NEXT STEPS: This item was postponed.

12. ANNOUNCEMENTS: There were no announcements.

13. ADJOURNMENT: The meeting adjourned at 11:23 pm.